

Staff Competencies, Education and Training

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INTRODUCTION

This plan creates a statewide competency-based system to be phased in over 18 months. Good examples for such a system already exist in North Carolina. One is a nationally recognized competency-based certification system for childcare workers. Another is the internationally recognized certification system for people providing substance abuse services.

There are a number of challenges with the current situation. Paraprofessionals are considered entry level in the labor market, but they are required to perform complex tasks such as providing behavioral services instruction unlike entry-level positions in other service industries. Turnover exceeds 100 percent and is as high as 200 percent in some organizations. Many new direct service staff lack basic competency skills including communication skills, relationship building and interpersonal skills. statewide training lacks consistent content and quality.

These challenges dramatically affect efforts to improve the system because:

- It is difficult to get information and resources to staff in many areas of the state.
- state and national studies document that until commitment is demonstrated, employers are reluctant to invest in/send staff for training due to turnover.
- Multiple roles of direct service staff make it difficult to release them to attend training.
- Employees must hold multiple jobs to earn a living wage and are not available to attend training.
- A very tight labor market currently exists at the paraprofessional level.
- Lack of supervision, mentoring, coaching and peer support strategies weaken efforts to train competent employees.
- Lack of incentives including financial, status and mobility make it difficult to retain employees.
- Lack of sufficient funding to address true personnel costs of system to train and retain qualified personnel inhibits a quality workforce.
- Inconsistent formats and schedules as well as access to training vary across the state.
- Lack of properly trained supervisors on the job compromises competent application of training information.
- Lack of active participation in national initiatives such as Workforce Incentives Act and Ticket to Work Implementation Act limit federal funding opportunities.

This new staff competency system is designed to address these challenges and improve the overall system by improving staffing across the state. This system will not replace or duplicate any of the existing licensing and certification boards. The associate level of the Infant Toddler Program in the Division of Public Health is equivalent to the paraprofessional level minimum standards. Staff meeting these provisions are not subject to additional requirements. It will supplement their activities by providing a framework for professionals and paraprofessionals that are not eligible for licensing/certification, to have their competence measured and documented. The staff competency-based system will create:

- A well trained, stable work force at all levels.
- A career ladder.
- Clear justification for increasing the wages paid to all levels of staff, particularly direct support paraprofessionals who have the most interactions with consumers.
- Partnerships with training and recruiting entities throughout North Carolina to maximize available resources in developing this workforce.

Several specific outcomes are expected with the new competency-based training system:

- Better care for people with disabilities through more stable support and service systems.
- Less staff turnover and reduction of associated costs of replacing and training new personnel.
- Reduction in administrative costs through standardizing qualifications and competencies for professionals and paraprofessionals.
- Improved professional ethics and standards.
- Higher morale and more motivated employees.
- Fewer service crises.
- Higher service quality.

COMPONENTS OF IMPLEMENTATION

Oversight

A Competency Verification and Review Board that includes stakeholders from throughout the service delivery system will provide oversight. This board will:

- Issue certificates verifying competency for professionals and paraprofessionals not otherwise certified or licensed.
- Provide ongoing evaluation and approval of outcomes to ensure consistency statewide.
- Provide an independent evaluation of circumstances involved in findings of incompetence during monitoring by the Division.
- Provide continuing oversight over the ongoing development of the total competency-based system.
- Provide oversight for the statewide registry.
- Ensure streamlined, cost effective statewide standardization of qualification and documentation processes for professionals and paraprofessionals.
- Address concerns and unusual situations from across the state.
- Oversee the effective and efficient operation of the personnel registry.

Documentation and statistics

Baseline data must be compiled so that measurable outcomes can be documented. This baseline data will include:

- Current state requirements for pre-hire of professionals and paraprofessionals.
- Current state requirements for post-hire training of the same individuals.
- Current needs, statewide and regionally, for these individuals.
- Current track record for moving individuals upward in these professions.
- Current career ladder for direct care professionals.
- Quality outcome indicators that can be measured against national standards (accident injury rate, staff turnover, etc.) and gathered on a regular and frequent basis in a manner that facilitates comparison.
- A statewide registry base identifying those individuals who currently fit the new definitions for professionals and paraprofessionals.
- Current level of turnover for public and private service delivery systems.

Collaborative partnerships

In order to build the collaborative partnerships to ensure that this system is affordable, efficient and available throughout the state, the following will happen:

- Identify training and service delivery systems to determine where the gaps are.
- Identify the stakeholders to provide full collaboration.
- Expand relationships with colleges and universities and the community college system.
- Expand relationships with Area Health Education Centers (AHECs).
- Identify certification organizations and professional certification training packages.
- Engage local management entities (county/area programs).
- Identify private and public training vendors.
- Identify private and public service providers.
- Engage the public school system – technical preparation courses.
- Engage the Office of state Personnel to update its classification system with appropriate salary adjustments.

Immediate action

Several actions must occur immediately. They are:

- Distribute a memo explaining the new system to all stakeholders.
- Publish the rules.
- Publish a user friendly brochure that explains all definitions of staff, the potential utilization within an organization, and which current service definitions are related to which staff functions.
- Align necessary service definitions to provide accurate relevant services billable either directly or through local management entities as part of the utilization management system.
- Identify current training opportunities available to support competencies development and disseminate information to all providers.
- Develop guidelines for supervisors and managers.
- Determine definitions for various levels of supervision, including both clinical and administrative, as well as experience supporting qualified status.
- Conduct orientation sessions.
- Fund all real costs associated with all aspects of the training and supervision, possibly through directly billable services or through local management entities (part of utilization management).
- Develop the requisite forms.
- Create an evaluation system using stakeholder feedback.

Statewide registry

A statewide registry of all professionals and paraprofessionals in the field will provide multiple benefits to consumers and service providers. The registry will ensure professional standards and credentials in the service delivery system. It will promote standardization and ensure staff competence statewide. A statewide registry will:

- Track the various competency completion levels of all non-licensed, non-certified employees in the competency-based system. (Licensed/certified employees seeking to work outside their scope of practice would seek certification via the competency-based system.)
- Provide online competency verification management.
- Review continuing education credits earned by registrants.
- Provide portability for individuals' competence that will significantly reduce service providers' training costs (by eliminating duplicative retraining).
- Track training providers who have been identified by the Competency Verification and Review Board.

The registry will be maintained by the state and will be accessible to service providers to verify competency certification of potential employees. Ideally, the registry would be linked to other licensing/certification entities for verification purposes as well.

Division's role in training

The competency-based system provides the opportunity to maximize the resources available through the provider network, the community college system, the university system, distance learning and many other venues that have yet to be identified in training professionals and paraprofessionals in mh/dd/sas. The state has a unique opportunity to develop an accessible resource network through which individual service providers from the smallest to the largest will be able to identify a training source for the various competencies that an employee will need to achieve the desired level of competence. The state will not have to enter into the development of curricula, but rather seek out those that have already been developed and use its leverage to make them affordable and accessible.

ENHANCEMENTS TO CURRENT STAFFING STRUCTURE

Qualified prevention professional

The State Plan makes prevention a core function, but the plan does not include a definition for qualified prevention professional, except in the field of substance abuse services. To proactively serve those individuals who are at risk but are not yet served within the system, the category of qualified prevention professional will be created.

The substance abuse services prevention professional will serve as an excellent model for the other disability groups. Substance abuse has a national certification process on which it is basing its North Carolina activity. The Division of MH/DD/SAS will begin to develop a qualified prevention professional who will address the core services of prevention and education as described in the State Plan.

Administrative paraprofessional

One of the greatest challenges that all service providers face is securing and retaining qualified professionals. With too few available to serve the thousands of people needing services, the challenge becomes how to better utilize the specialized skills of these professionals. By delegating the bureaucratic paperwork to another staff person, the qualified professional can focus appropriate time to the clinical tasks that they have been trained to perform. The creation of a new position, the administrative paraprofessional, would allow the delegation of critical supervisory management functions of a non-clinical nature to a skilled, experienced individual, thus freeing the qualified professional for dedicated clinical time.

This position would also create an opportunity for advancement on the career ladder for paraprofessionals who demonstrate excellence in their field of work, desire advancement, but do not have a degree.

Existing barriers

Staff turnover

One of the major barriers is staff turnover. Service delivery rates do not account for the retraining that must occur due to turnover within a given fiscal year. Rates must reflect turnover in direct care service delivery. Incentives will be developed to encourage employee retention.

Language is becoming an increasingly significant factor in any analysis of workplace issues. North Carolina's Hispanic population is growing rapidly and consequently is a significant segment of both the consumer population being served as well as the potential employee base. The need for bilingual employees will gain importance with each year and must be addressed proactively with incentives built into the staffing structure to attract bilingual professionals and paraprofessionals.

Other factors affecting workforce limitations that must be overcome are:

- Culture.
- Low pay.
- Lack of basic education.
- Transportation.
- Rural, low economic areas.
- Lack of available trained workforce.
- Lack of benefits and paid holidays.

Supervision

Qualified supervisors in sufficient numbers will be required to implement the competency-based system. The cost of providing adequate supervision must be incorporated in the rate paid directly to the service

provider. Currently, there is an inadequate supply of qualified supervisors, which contributes to turnover. Supervisors are also expected to multi-task and supervise a high number of people. The creation of the administrative paraprofessional and the implementation of that position statewide will slowly help to alleviate some of that burden, but those positions will need to be funded and supported to be accepted by service providers.

New supervisors must be recruited and trained. Qualified professionals (QPs) currently employed in the field will be trained to teach their employees. Supervisors must motivate and manage people on a daily basis. Supervisors must evaluate the competency of their employees and determine the level of supervision the employee requires, subsequently reflected in the supervision plan. Any training program that can meet the objectives of this plan must ensure that supervisors are trained. While this will appear to be very similar to “train-the-trainer”, the relationship between the supervising qualified professional and the associate professional/paraprofessional will be that of a mentor. Competencies for supervisors and managers will be developed as part of the statewide effort. An annual supervision plan will be developed, and the supervisor will be responsible for its implementation.

The preparation of supervising QPs will include:

- Training supervisors in motivating and managing people on a daily basis.
- Training supervisors for competency evaluation.
- Defining and identifying levels of supervision.

Table 1. Overview of competency-based training system in operation

Level	Initial Assessment	Orientation	Basic Skills	Advanced Skills	Updating Skills & Knowledge
<i>When Implemented</i>	<i>Prior to hiring</i>	<i>Immediately after hire and before independently interacting with people served</i>	<i>Within three months</i>	<i>By the completion of the first year</i>	<i>After the first year, and continuing throughout employment</i>
Type of training / competencies identified	<ul style="list-style-type: none"> • Verification of education and certifications • Assessments during interview of competencies for relevant domains. 	<p>Performance of service is contingent upon training in that service area.</p> <ul style="list-style-type: none"> • Rights and protection (consumer rights, abuse, neglect, exploitation & confidentiality of individual's information/ records). • Incident/accident reporting. • Prevention and alternatives to restrictive interventions. • Restraints/seclusion requirements (as applicable). • Service definitions & documentation requirements. • Overview or planning with individuals/families. • Blood borne pathogens/standard precautions. • Individualized services and support plan for person/family. • Behavioral/crisis issues (when applicable). • Health issues. • Medication administration (when applicable). 	<p>Attainment of minimal levels of disability specific competencies as identified within the seven domains identified and addressed in the supervision plan for professional and paraprofessional levels.</p> <p>Assessment of competencies for relevant domains via oral/written test, interview and observation by supervisor.</p>	<p>Achievement of acceptable level of competence in remaining disability specific competencies within each of the seven domains and addressed in the supervision plan for professional and paraprofessional levels.</p>	<p>Continuing to seek and maintain excellence in all competencies, building on existing knowledge and demonstrating the application of knowledge appropriate for the professional or paraprofessional level.</p>

Level	Initial Assessment	Orientation	Basic Skills	Advanced Skills	Updating Skills & Knowledge
<i>When Implemented</i>	<i>Prior to hiring</i>	<i>Immediately after hire and before independently interacting with people served</i>	<i>Within three months</i>	<i>By the completion of the first year</i>	<i>After the first year, and continuing throughout employment</i>
		<ul style="list-style-type: none"> • CPR/first aid (when applicable). • Other relevant orientation information. • Disaster preparedness & response. 			
Deliverer of training / assessment	Service provider	Service provider or third party vendor achieving outcomes approved by Competency Verification and Review Board.	Service provider or third party vendor achieving outcomes approved by Competency Verification and Review Board.	Service provider or third party vendor achieving outcomes approved by Competency Verification and Review Board.	Service provider or third party vendor achieving outcomes approved by Competency Verification and Review Board.
Format of training	Interview and background checks	<p>Classroom setting, online distance learning, videotape with workbooks and/or computerized program.</p> <p>Assessment of information learned prior to on-the-job experience.</p>	<p>On-the-job mentoring and training and or classroom instruction.</p> <p>Can be supplemented with online or computerized content.</p>	Classroom setting, on the job mentoring and training, classroom instruction, online distance learning, hands on training where appropriate for specific competencies and level of professional/ paraprofessional.	Combination of classroom and distance learning. Supplemented as well with approved computerized course work.
Assessment Instrument	Possible rubric for interviewer's reference to assess competencies within each domain.	Documented written /oral test, guided observation or work sample, to ascertain level of knowledge in orientation topics.	Documented guided observation of demonstrated competence by qualified supervisor and/or written/oral or work sample assessment of content knowledge.	Observation of demonstrated competence by qualified supervisor in addition to written assessment of content knowledge.	Competencies will continue to be measured on an ongoing basis as described in the competency domains as evidenced by relevant formal/

Level	Initial Assessment	Orientation	Basic Skills	Advanced Skills	Updating Skills & Knowledge
<i>When Implemented</i>	<i>Prior to hiring</i>	<i>Immediately after hire and before independently interacting with people served</i>	<i>Within three months</i>	<i>By the completion of the first year</i>	<i>After the first year, and continuing throughout employment</i>
					informal education/ training, certification or licensure.
Outcomes	Viable candidate meeting pre-hiring requirements.	Employee now ready to interact one-on-one with person served. Competence verification sent to state registry.	Employee, under supervision, demonstrates minimal competence in the specified disability. Competence verification sent to state registry.	Employee, under appropriate supervision for level, is determined competent. Full competence verification issued, tracked at state level in master database.	Employee improves continually in quality of service delivery.

Table 2. Timeline for competency-based training and certification system

Item	Activities	Sections/Resources	Start Date
Collaborative agreements	Identify resources for collaborative agreement.	Division representatives, NC Council of Community Programs, Providers Council and providers.	
	<ul style="list-style-type: none"> Community college system: Develop a Division workgroup to establish parameters of a collaborative agreement which involves the following community college departments: <ul style="list-style-type: none"> Continuing education/community service. Curricular studies. New and expanding industries program. Virtual colleges, distance learning and self-paced learning programs. 	Representatives from the Division regarding contracts, communications and training; area programs; & provider representative groups.	November 2002
	<ul style="list-style-type: none"> Department of Public Education (similar to tech-prep program). 	Representatives from the Division regarding contracts, communications and training; area programs; & provider representative groups.	November 2002
	<ul style="list-style-type: none"> state university system: <ul style="list-style-type: none"> Continuing education programs. Virtual colleges, distance learning and self-paced learning programs. Curriculum development. 	Representatives from the Division regarding contracts, communications and training; area programs; & provider representative groups.	November 2002
	<ul style="list-style-type: none"> Area Health Education Centers (AHECs). 	Representatives from the Division regarding contracts, communications and training; area programs; & provider representative groups.	November 2002
	<ul style="list-style-type: none"> Associated training vendors: <ul style="list-style-type: none"> DDTI. Professional associations. Area programs/LMEs. Providers. Training providers. 	Representatives from the Division regarding contracts, communications and training; area programs; & provider representative groups.	November 2002
Implementation rules	Distribute rules and guidelines prior to requiring implementation. Include an explanation of timelines and what is expected from whom. Provide regional training.	Representatives from all committees involved and those who can answer financial questions.	July 2002
Approval of new category for qualified	<ul style="list-style-type: none"> Develop new definition and submit for approval by the Rules Commission. 	<ul style="list-style-type: none"> Competency workgroup. Division personnel, as appropriate. 	January 2002

Item	Activities	Sections/Resources	Start Date
prevention professional in rule	<ul style="list-style-type: none"> • Submit SA competencies for prevention professional to be included in the state competency-based system. • Develop mh/dd versions of competencies. • Develop service definitions to support activities of the prevention professional. • Using previous process as model, ensure that the prevention professional category is fully integrated into the competency-based system. 	<ul style="list-style-type: none"> • Rules Commission. 	
Approval of new category for administrative paraprofessional	<ul style="list-style-type: none"> • Develop new definition and submit for approval by Rules Commission. • Develop competencies to support new staff function. • Coordinate service definitions to support new staff function. • Develop educational brochure for use by service providers and LMEs to promote broad acceptance and use of new function. 	<ul style="list-style-type: none"> • Competency workgroup. • Division personnel, as appropriate. • Rules Commission. 	March 2002
Coordination of care competencies	<ul style="list-style-type: none"> • Develop framework for coordination of care staff. • Develop staff definitions. • Develop staff functions. • Develop corresponding competencies. 	<ul style="list-style-type: none"> • Competency workgroup. • Division personnel, as appropriate. • Rules Commission. 	July 2003
Funding secured	<ul style="list-style-type: none"> • Funding resources required by State Plan. • Increase in administrative overhead designated for training. • One-time start up funds for employee training. • Hourly billing rate for training of professional and paraprofessional staff. • Incentives for reduced staff turnover. 	Representatives the Division regarding contracts & budget, area program financial officers and providers' business managers.	March 2002
Training resources database	<ul style="list-style-type: none"> • Develop data base of available training resources for providers, area programs/LMEs. • Collaborate with training vendors/resources and training publications. • Post data on Division web site. 	Representatives from the Division regarding communications and training.	July 2002
Outcomes development	Prepare outcomes for competencies: <ul style="list-style-type: none"> • Qualified professional mh/dd/sas. 	Competency workgroup.	June 2002

Item	Activities	Sections/Resources	Start Date
	<ul style="list-style-type: none"> • Direct service paraprofessional mh/dd/sas. • Administrative paraprofessional. • Qualified prevention professional mh/dd/sas. 	Competency Verification and Review Board Representatives from the Division regarding program accountability.	
Competency Verification and Review Board	Develop a Competency Verification and Review Board that would: <ul style="list-style-type: none"> • Work with the Division to establish quality standards for competency verification process. • Review and verify competency documentation. • Issue verification based on quality standards. • Review disputes regarding verification. 	Representatives from the Division, providers, area programs/LMEs, consumers/families and advocacy groups.	January 2003
Web hosting issues for testing management	<ul style="list-style-type: none"> • Working with collaborative partners to identify web hosting testing management capabilities • Identify current vendors of testing management 	<ul style="list-style-type: none"> • Representatives from the Division regarding information technology, communications and training; collaborative partners. • Competency Verification and Review Board. 	December 2002
Registry management	Develop a registry of individuals who have achieved required levels of competency and are determined competent to deliver services.	<ul style="list-style-type: none"> • Representatives from the Division regarding information technology, communications and training. • Competency Verification and Review Board. 	July 2002
Legal ramifications of portability of certification	Develop with the providers/area programs/LMEs an agreement of competence levels that will be accepted as portable across programs and providers.	<ul style="list-style-type: none"> • Representatives from the Division, area programs/LMEs and providers. • Competency Verification and Review Board. 	November 2002

COMPETENCIES FOR STAFF WHO WORK WITH PERSONS SERVED THROUGH THE NORTH CAROLINA MH/DD/SA SERVICES SYSTEM

I.1 Professional categories and definitions for the qualified professional and paraprofessional for mental health, developmental disabilities and substance abuse services

Within the Division of MH/DD/SAS system of care, the categories include:

- Qualified professional.
- Associate professional.
- Administrative paraprofessional.
- Paraprofessional.

I.1 Qualified professional: educational and experience requirements

Is licensed, provisionally licensed, certified or provisionally certified by a professional licensing or certification board in a related human service field;

Or

Graduate of a college or university with a master's degree in a related human service field.¹

And

Has one year of full-time, post-graduate accumulated mh/dd/sa experience with the population served or two years post-baccalaureate mh/dd/sa experience with the population served; a substance abuse professional shall have one year of full time post-graduate accumulated supervised experience in alcoholism and drug abuse counseling;

Or

Graduate of college or university with a baccalaureate degree in a related human service field.

And

Has two years of full-time, post-baccalaureate accumulated mh/dd/sa experience with the population served; a substance abuse professional shall have two years of full-time post-baccalaureate accumulated supervised experience in alcoholism and drug abuse counseling;

Or

Graduate of college or university with a baccalaureate degree in a field not related to human services.

Or

Is a registered nurse.

And

Has four years of full-time, post-baccalaureate accumulated mh/dd/sa experience with the population served; a substance abuse professional shall have four years of full-time post-baccalaureate accumulated supervised experience in alcoholism and drug abuse counseling.

I. 2. Associate professional: educational, experience and supervision requirements

Graduate of a college or university with a masters degree in a related human service field; a substance abuse professional with less than one year of full-time post-graduate accumulated supervised experience in alcoholism and drug abuse counseling. Upon hiring, an individualized supervision plan (ISP) will be developed and

¹ "Human service field" – The most commonly used reference for this designation is a set of guidelines written by the NC Office of state Personnel in 1993 to clarify the issue of acceptable human services degrees. These are not established as immutable standards. These guidelines state in part:

Commonly accepted degrees that do not require a transcript (i.e., for the agency who is hiring to review): Counseling and Guidance, Psychology, Rehabilitation Counseling, Social Work, Special Education, Therapeutic Recreation.

Related degrees with courses that apply to human services but require a transcript review: Child Development and Family Relations (ECU), Criminal Justice, Education, Health Education, Nursing, Occupational Therapy, Physical Therapy, Religion, Social Sciences, Sociology/Anthropology.

supervision provided by a qualified professional with the population served for the necessary period of time until the individual meets the one year of experience;

Or

Graduate of a college or university with a baccalaureate degree in a related human service field and for a substance abuse professional with less than two years of full-time post-baccalaureate accumulated supervised experience in alcoholism and drug abuse counseling. Upon hiring, an individualized supervision plan (ISP) will be developed and reviewed annually. Supervision will be provided by a qualified professional with the population served for the necessary period of time until the individual meets the two years of experience;

Or

Graduate of a college or university with a baccalaureate degree in a field not related to human services, and a substance abuse professional with less than four years of full-time post-baccalaureate accumulated supervised experience in alcoholism and drug abuse counseling,

Or

Is a Registered Nurse, upon hiring, an Individualized Supervision Plan (ISP) will be developed, and reviewed annually. Supervision will be provided by a qualified professional with the population served for the necessary period of time until the individual meets that four years experience.

I.3 Administrative paraprofessional: educational, experience and supervision requirements

Has a GED /high school diploma.

And

Has five years experience. Upon hiring, an individualized supervision plan (ISP) shall be developed and supervision shall be provided by a qualified professional or associate professional with the population served.

I.4. Paraprofessional: Educational, Experience and Supervision Requirements

Has an associate degree (2-year) and is provided monthly supervision by a qualified professional or an associate professional with the population served.

Or

A GED/high school diploma and is provided monthly supervision by a qualified professional or professional associate professional with the population served.

(NOTE: For non-habilitative services rendered under the CAP/MR-DD Waiver – please refer to the CAP-MR/DD Manual.)

QUALIFIED PROFESSIONAL, ASSOCIATE PROFESSIONAL AND PARAPROFESSIONAL: COMPETENCIES

Following are the seven core skill areas required to meet the minimal standards for a competency-based system in North Carolina. Each core skill area is separately addressed for each disability group from two perspectives: (1) before starting work and (2) during ongoing evaluation.

- I. Technical knowledge
- II. Cultural awareness
- III. Analytical skill
- IV. Decision-making
- V. Interpersonal skills
- VI. Communication skills
- VII. Clinical skills

Table 3. For qualified professionals (QP) and associate professionals (AP) providing mental health services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
I. Technical Knowledge In the use of relevant counseling and psychotherapeutic techniques that apply to the service(s) authorized. Understands and can articulate technical concepts and information that relate to the nature of the disorder(s) treated and the therapies used to provide treatment. Recognizes signs and symptoms of mental health needs and co-occurring disorders related to the population served.	I. Demonstrates knowledge of counseling, psychotherapeutic techniques, and psychiatric medication.		Verification of renewal of license and/or certification as appropriate. Direct clinical observation. Clinical supervision.* ² Review of clinical documentation.	
<i>Before starting work:</i> 1. Verification of Education and Credentials per transcript(s), license, and / or certification that relate to the appropriate area of knowledge/ discipline. 2. Assess relevant technical knowledge through the employment interview process.	II. Demonstrates knowledge of interagency and community supports.		Peer review. Ongoing clinical supervision. Review of clinical documentation. Observation during treatment team meetings.	
	III. Demonstrates knowledge of System of		Participation in collaborative meetings.	

² "Clinical/professional supervision" is regularly scheduled by a qualified professional with a staff member who is providing direct, therapeutic intervention to a person or persons. The purpose of clinical supervision is to ensure that each consumer receives appropriate treatment or habilitation that is consistent with accepted standards of practice and the needs of the individual, and to enhance the knowledge, skills and abilities of clinicians receiving supervision. For Professional Associates this supervision must be documented.

Table 3. For qualified professionals (QP) and associate professionals (AP) providing mental health services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	Care principles and local and regional application.		Ongoing supervision. Review of Clinical documentation.	
	IV. Recognizes signs and symptoms of MH needs and co-occurring disorders.		Peer review. Ongoing clinical supervision. Review of clinical documentation. Observation during treatment team meetings.	
	V. Maintains knowledge of ongoing changes in technical knowledge and best practice standards for the populations served, and articulates how those changes impact services.		Documented annual continuing education. Demonstrates to supervisor positive application of newly acquired knowledge.	
	VI. Other competencies as required by state statute and/or rule, such as confidentiality rules, seclusion and restraints, and consumer rights.		As appropriate and determined by the relevant statute or rule.	

Table 3. For qualified professionals (QP) and associate professionals (AP) providing mental health services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
II. Cultural Awareness In the delivery of services to diverse populations. Understands and can articulate the psychological, sociological and political aspects of providing MH/DD/SAS services to diverse populations. Ability to communicate and to provide competent and appropriate services to diverse populations.	I. Interacts with person receiving services, family and extended support system in a culturally sensitive manner.		Peer review. Ongoing clinical supervision. Review of clinical documentation. Observation during treatment team meetings.	
<i>Before starting work:</i> 1. Assess cultural awareness sensitivity through case scenarios during the employment interview process. 2. Articulate how to elicit and address needs of the population served with respect and dignity.	II. Interacts with colleagues and other professionals in a culturally sensitive manner.		Peer review. Ongoing supervision. Annual performance evaluation.	
	III. Understands the impact of personal belief system on delivery of services, and appropriately adjusts personal performance.		Peer review Ongoing clinical supervision. Review of clinical documentation (assessments, testing, incident reports, and service plans) Observation during treatment team meetings. Documented annual continuing education.	
	IV. Maintains knowledge of issues that affect the populations		Demonstrates to supervisor positive application of culturally sensitive techniques.	

Table 3. For qualified professionals (QP) and associate professionals (AP) providing mental health services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	served.		Articulates how those issues impact services.	
	IV. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant statute or rule.	
III. Analytical Skill In screening, assessing and evaluating person receiving services. Understanding psychological, physical, emotional, spiritual, cultural and developmental issues, determines accurate diagnosis and/or assessment, and interprets evaluative instruments correctly in order to accurately reflect the individual's strengths, preferences and needs.	I. Utilizes most effective tools to screen, assess and evaluate the person receiving services.		Verification of renewal of license and/or certification as appropriate. Review of reports generated by screening, assessing, and evaluation. Ongoing clinical supervision.	
<i>Before starting work:</i> Verification of Education and Credentials per transcript(s), license, and / or certification that relate to the appropriate area of knowledge/ discipline. Determine screening and assessment instrument knowledge and familiarity through employment interview process.	II. Establishes accurate diagnosis and/or assessment.		Ongoing clinical supervision. Review of clinical documentation.	
	III. Interprets evaluative instruments correctly in		Ongoing clinical supervision.	

Table 3. For qualified professionals (QP) and associate professionals (AP) providing mental health services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	order to accurately determine the individual's needs.		Review of clinical documentation.	
	IV. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant law or rule.	
IV. Decision-Making In the accurate appraisal of problems and conditions of person being served in a variety of settings and systems. Ability to synthesize individual's information from involved agencies or sources, and to formulate and implement an appropriate clinical course of action in collaboration with these agencies or sources. Ability to recognize persons' needs and to refer individual to appropriate professionals and resources. Makes appropriate decisions and/or referral in a timely manner.	I. Demonstrated ability to make decisions in collaboration with individuals, families, and involved agencies or sources.		Peer review. Direct clinical observation and supervision of collaborative efforts. Feedback from individuals, families, and involved agencies or sources.	
<i>Before starting work:</i> 1. Evaluate decision-making abilities through case scenarios 2. Employment interview with interviewer.	II. Synthesize individual and system information and implement course of action as agreed upon by individuals, families, and involved agencies or sources.		Feedback from individuals, families, and involved agencies or sources.	
	III. Other competencies as required by state		As appropriate and determined by the	

Table 3. For qualified professionals (QP) and associate professionals (AP) providing mental health services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	statute and/or rule.		relevant statute or rule.	
V. Interpersonal Skill Is the ability to establish rapport, openness, and trust. Ability to interact effectively with individuals, families, and involved agencies to promote active treatment and relapse prevention.	I. Promotes active treatment and relapse prevention.		Feedback from persons receiving services, family members, co-workers, clinical supervisor, others providers, and involved agencies. Peer review results, direct observation by supervisor. Outcomes.	
<i>Before starting work:</i> 1. Employment interview. 2. Evaluate interpersonal skills through case scenarios administered by interviewer.	II. Interacts effectively with individuals and groups.		Feedback from persons receiving services, family members, co-workers, clinical supervisor, others providers, and involved agencies. Supervision.	
	III. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant statute or rule.	

Table 3. For qualified professionals (QP) and associate professionals (AP) providing mental health services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VI. Communication Skills Ability to effectively formulate and clearly articulate ideas in both verbal and written forms. The ability to effectively interpret and convey verbal and non-verbal information through appropriate means for the individual and the population served.	I. Active listening		Feedback from individuals, co-workers, supervisors and providers.	
<i>Before starting work:</i> 1. Employment interview 2. Evaluate communication skills through case scenarios administered by interviewer.	II. Receiving and imparting information effectively		Progress of individual during the course of treatment. Results of records review. Supervision. Oral and written communication.	
	III. Write appropriate treatment plans and/or service notes to the person's identified needs.		Results of quantitative and qualitative review.	
	IV. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant law or rule.	

Table 3. For qualified professionals (QP) and associate professionals (AP) providing mental health services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VII. Clinical Skills Ability to successfully assess, evaluate and provide individuals with the treatment and therapies appropriate to the person's identified needs and conditions.	I. Effective assessment, evaluation, and treatment of individual with mental health needs.		Outcomes. Clinical supervision. Clinical documentation. Feedback from individuals, families, and involved agencies.	
<i>Before starting work:</i> 1. Verification of education and credentials per transcript(s), license, and / or certification that relate to the appropriate area of knowledge/ discipline. 2. Assess clinical knowledge during employment interview process.	II. Maintains knowledge of best practices regarding clinical treatment for the populations served, and articulates how those changes impact services.		Documented annual continuing education. Demonstration to supervisor positive application of newly acquired knowledge.	
	III. Effectively utilizes quality improvement principles to improve applied clinical skills.		Review of clinical documentation. Feedback from individual receiving treatment. Review of utilization review and management information. Peer review and clinical supervision.	
	IV. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant law or rule.	
VIII. Supervision & Management Skills				

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
I. Technical Knowledge Understands and can discuss concepts and information that relate to the services and supports being used; and understands the indicators of developmental delay, disability, or co-occurring disorders.	I. Habilitation and treatment techniques. (Refers to the knowledge base of the professional.)		Verification of renewal of license and/or certification as appropriate. Direct observation. Professional supervision. * ³ Review of documentation (progress reports).	
<i>Before starting work:</i> Verification of education and credentials per transcript(s), license, and / or certification that relate to the appropriate area of knowledge/ discipline. Assess relevant technical knowledge through the employment interview process	II. Demonstrates knowledge of interagency and community supports.		Peer review. Ongoing supervision. Review of documentation. Observation during treatment team meetings.	
	III. Recognizes the functional deficits that are indicators of developmental delay or disabilities and co-occurring disorders.		Peer review. Ongoing supervision.* Review of documentation (assessment, testing, incident reports, and service plans). Observation during treatment team meetings.	

³ " Clinical or professional supervision" is regularly scheduled by a qualified professional with a staff member who is providing direct intervention to a person or persons. The purpose of supervision is to ensure that each person receives appropriate treatment or habilitation which is consistent with accepted standards of practice and the preferences and needs of the person. Clinical supervision is required for the provision of services for individuals with co-occurring diagnosis. For Professional Associates this supervision must be documented.

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	IV. Demonstrates knowledge of crisis prevention, intervention, and resolution techniques, matching techniques to particular circumstances and individuals.		Peer review. Ongoing supervision. Review of documentation.	
	V. Maintains knowledge of ongoing changes in technical knowledge and best practice standards for the populations served, and articulates how those changes impact services.		Documented annual continuing education. Demonstrates to supervisor positive application of newly acquired knowledge.	
	VI. Other competencies as required by state statute and/or rule, such as Confidentiality rules, Seclusion and Restraints, and Client Rights.		As appropriate and determined by the relevant law or rule.	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
II. Cultural Awareness Understands the various cultures, genders, socio-economic influences, and religious beliefs of the individuals served and advocates for those individual beliefs throughout the planning and plan implementation process.	I. Interacts with person receiving services, family, and extended support system in a culturally sensitive manner.		Peer review. Ongoing supervision. Review of documentation. Observation during treatment team meetings.	
<i>Before starting work:</i> Assess cultural awareness sensitivity through case scenarios during the employment interview process. Articulate how to elicit and address needs of the population served with respect and dignity.	II. Interacts with colleagues and other professionals in a culturally sensitive manner.		Peer review. Ongoing supervision. Annual performance evaluation.	
	III. Understands the impact of personal belief system on delivery of services, and appropriately adjusts personal performance.		Peer review Ongoing supervision. Review of documentation. Observation during treatment team meetings.	
	IV. Maintains knowledge of ongoing changes in the cultures being served, and articulates how those changes impact services.		Documented annual continuing education. Demonstrates to supervisor positive application of culturally sensitive techniques.	
	V. Other competencies		As appropriate and determined by the	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	as required by state statute and/or rule.		relevant law or rule.	
III. Analytical Skill The ability to gather information on the individual's capabilities, gifts, behaviors, preferences, skills and needs for use in the development of the individual's individual plan. Evaluate situations in order to respond appropriately.	I. Utilizes most effective tools to screen, assess and evaluate the person receiving services.		Verification of renewal of license and/or certification as appropriate. Review of reports generated by screening, assessing, and evaluation. Ongoing supervision.	
<i>Before starting work:</i> Verification of education and credentials per transcript(s), license, and / or certification that relate to the appropriate area of knowledge/ discipline. Determine screening and assessment instrument knowledge and familiarity through employment interview process.	II. Identifies and initiates accurate assessment that reflects the participant's strengths, preferences, and needs, consistent with best professional practice.		Ongoing supervision. Review of documentation.	
	III. Interprets assessment results to accurately determine the individual's strengths, preferences, and needs.		Ongoing supervision. Review of documentation.	
	IV. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant law or rule.	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
IV. Decision-Making The ability to balance support for the individual's stated choices against the core responsibilities, limitations of the position and potential risks to the person. To use information from different sources, specific to the individual, in order to present a complete 'picture' of the situation/event. To assist the individual to use findings of assessments to develop strategies for obtaining needed resources and supports. And to use information to make appropriate and timely decisions and/or referrals.	I. Appraisal of individual's capabilities, personal goals, preferences for intervention and needs.		Peer review/ Direct observation and supervision for a period of twelve- (12) months.	
<i>Before starting work:</i> Evaluate decision-making abilities through case scenarios Employment interview with interviewer.	II. Synthesize information, develop a plan of action with the individual, and implement course of action.		Evaluate decision-making abilities through case scenarios. Evaluate effectiveness of decisions through use of measurement of outcomes achieved as perceived by the individual.	
	III. General understanding and application of necessary interventions that ameliorate, compensate or minimize problems secondary to the primary disability or medical		On-going supervision. Observation. Assessment of outcomes.	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	problem.			
	IV. Balances support for the individual's stated choices with considerations of professional responsibility and ethics, as well as potential risks		Observation of use of problem solving skills to resolve conflicts	
	V. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant law or rule.	
V. Interpersonal Skill Ability to establish and maintain effective relationships with individuals, their families, co-workers and others.	I. Works effectively with other staff to review the organizational mission, develops organizational priorities, and discusses quality indicators for support of the individuals receiving services.		Feedback from individuals receiving services, family members, co-workers, supervisor, others providers, and staff. Supervision.	
<i>Before starting work:</i> Employment interview Evaluate interpersonal skills through case scenarios administered by interviewer.	II. Effectively works with the individual and others to develop practices sensitive to cultural, religious, disability, and gender issues.		Feedback from individual receiving services, family members, co-workers, clinical supervisor, others providers, and staff. Look at peer review results, direct observation by supervisor. Interview.	
	III. Effectively interacts with and educates participants, co-workers and community members and organizations about		Observation. Community feedback. Peer review.	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	issues by providing information and support and facilitating training.			
	IV. Assists the individual in identifying personal, civic, and interpersonal responsibilities, and to develop strategies to meet them.		Review of outcome assessments Observation	
	V. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant law or rule.	
VI. Communication Skills Ability to effectively formulate and articulate ideas in both verbal and written forms ability to use effective, sensitive communication skills to build rapport and channels of communication by recognizing and adapting to the range of the person's communication styles.	I. Uses active listening skills that are sensitive to cultural and individual communication differences.		Feedback from individuals, co-workers, supervisors and providers.	
<i>Before starting work:</i> Employment interview Evaluate communication skills through case scenarios administered by interviewer.	II. Communicates effectively with staff, provider agencies and community agencies to ensure participant access to agency and community wide resources.		Progress of individual. Results of records review. Supervision. Oral and written communication. Peer review. Observation.	
	III. Establishes and maintains relations with civic groups, agencies,		Supervisor observation	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	other professionals, governmental entities, and the community-at-large to ensure appropriate referrals, identify service gaps, expand community resources, and help to address unmet needs.		Outcome assessment	
	IV. Has knowledge of and uses modes of communication that are appropriate to the communication needs of individuals.		Observation.	
	V. Develops or assists in the development of an individualized plan based upon the person's preferences, needs and interests.		Results of quantitative and qualitative review.	
	VI. Maintains accurate records, collecting, compiling and evaluating data, demonstrating objective reporting techniques, and submitting records to appropriate sources in a timely fashion.		Record review. Audit report.	
	VII. Remains current with and demonstrates use of appropriate documentation systems,		Review of documentation Observation of effectiveness of documentation system.	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	setting priorities and developing a system to manage documentation.		Supervisor report. Audit report.	
	VIII. Exchanges relevant information with the agency or professional to whom a referral is being made in a manner consistent with confidentiality regulations and generally accepted professional standards of care.		Agency feedback. Individual report. Review of release documentation.	
	IX. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant statute or rule.	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VII. Clinical Skills The ability to successfully assess, evaluate and provide individuals with services, supports and resources appropriate to the identified strengths, preferences, needs and conditions.	I. Ability to assess, evaluate and provide MH/DD/SAS services, supports and access to resources effectively.		Progress of individual in relation to goals and outcomes. Feedback from individuals, co-workers, supervision, peer review and providers.	
<i>Before starting work:</i> Verification of education and credentials per transcript(s); license, authorization or certification if providing services and supports for individuals with co-occurring disabilities.	II. Attainment of specific skills, abilities and knowledge and best practice standards in the areas of disabilities and human services, psychology and behavioral sciences, and physical health.		Verification of education and credentials. Peer review and supervision results. Training/continuing education and/ or obtain advanced degree.	
	III. Ability to recognize the need for, arrange and coordinate referrals and services to other professionals, agencies, community programs, or other appropriate resources to meet individual needs.		Review of plan. Outcome assessment. Supervision. Agency feedback.	
	IV. Ability to apply crisis intervention techniques.		Supervision. Observation. Efficacy of interventions.	
	V. Ability to understand and recognize stages of change and other signs of progress.		Review of plan revisions. Review of documentation. Outcome assessment.	

Table 4. For qualified professionals (QP) and associate professionals (AP) providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	VI. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant statute or rule.	
VIII. Supervision & Management Skills				

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
I. Technical Knowledge In the use of relevant counseling techniques that apply to the service(s) authorized. Understands and can articulate technical concepts and information that relate to the nature of the services used to provide treatment. Recognizes signs and symptoms of substance abuse needs and co-occurring disorders.	I. Demonstrates knowledge of counseling techniques including: a. Approaches to counseling including philosophies, modalities, methods and techniques. b. Application of counseling approaches to the individual consumer, spouse and family. c. Implications of counseling approaches to consumers from ethnic, cultural and socio-economic groups in our society. d. Group process, group communications, goal setting, contracting, problem solving and supportive techniques. <i>(NCSAPCB Competencies).</i>		Verification of renewal of license and/or certification as appropriate. ⁴ Direct clinical observation. Clinical supervision. * ⁵ Review of clinical documentation.	

⁴ For purposes of initial employment the CSAC meets the minimum standards by virtue of their certification.

⁵ "Clinical/professional supervision" is regularly scheduled by a qualified professional, with a staff member who is providing direct, therapeutic intervention to a person or persons. The purpose of clinical supervision is to ensure that each individual receives appropriate treatment or habilitation that is consistent with accepted standards of practice and the needs of the individual consumer. For Professional Associates this supervision must be documented.

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
<i>Before starting work:</i> Verification of education and credentials per transcript(s), license, and / or certification that relates to the appropriate area of knowledge/ discipline. Assess relevant technical knowledge through the employment interview process.	II. Demonstrates knowledge of interagency and community supports: a. Steps, traditions and philosophy of Alcoholics Anonymous and its relation to Al-Anon and Alateen. b. Social services available.(NCSAPCB Competencies) c. Client education through provision of information to individuals and groups concerning alcohol and other drug abuse and the available services and resources (NCSAPCB Core Function).		Peer review. Ongoing supervision.* Review of documentation. Observation during treatment team meetings.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	<p>III. Recognizes signs and symptoms of SA needs and co-occurring disorders:</p> <p>a. Physiological problems caused by the ingestion of alcohol and drugs and their effects on the systems of the body.</p> <p>b. Psychological and emotional factors related to substance abuse. Relationship of blood levels and behaviors.</p> <p>c. Effects of chronic use of substances including relationship to individual body chemistry, dose and setting.</p> <p>d. Dependency and cross-dependency.</p> <p>e. Criteria for diagnosis including systems for total assessment.</p> <p>(NCSAPCB Competencies)</p>		<p>Peer review.</p> <p>Ongoing clinical supervision.</p> <p>Review of clinical documentation.</p> <p>Observation during treatment team meetings.</p>	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	IV. Maintains knowledge of ongoing changes in technical knowledge and best practice standards for the populations served, and articulates how those changes impact services.		Documented annual continuing education. Demonstrates to supervisor positive application of newly acquired knowledge.	
	V. Other competencies as required by state statute and/or rule, such as confidentiality rules, seclusion and restraints, and client rights.		As appropriate and determined by the relevant law or rule.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
II. Cultural Awareness In the delivery of services to diverse populations. Understands and can articulate the psychological, sociological and political aspects of providing MH/DD/SAS services to diverse populations. Ability to communicate and to provide competent and appropriate services to diverse.	I. Interacts with person receiving services, family, and extended support system in a culturally sensitive manner.		Peer review. Ongoing clinical supervision. Review of clinical documentation. Observation during treatment team meetings.	
<i>Before starting work:</i> Assess cultural awareness sensitivity through case scenarios during the employment interview process. Articulate how to elicit and address needs of the population served with respect and dignity.	II. Interacts with colleagues and other professionals in a culturally sensitive manner.		Peer review. Ongoing supervision. Annual performance evaluation.	
	III. Understands the impact of personal belief system on delivery of services, and appropriately adjusts personal performance: a. Socio-cultural aspect of substance abuse. (NCSAPCB Competency)		Peer review. Ongoing clinical supervision. Review of clinical documentation. Observation during treatment team meetings.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	IV. Maintains knowledge of ongoing changes in the cultures being served, and articulates how those changes impact services.		Documented annual continuing education. Demonstrates to supervisor positive application of culturally sensitive techniques.	
	IV. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant law or rule.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
III. Analytical Skill In screening, assessing and evaluating person receiving services. Understanding psychological, physical, emotional, spiritual, cultural and developmental issues. Establishes accurate diagnosis and/or assessment, and interprets evaluative instruments correctly in order to accurately determine the individual's needs.	I. Utilize screening to determine if the consumer is appropriate and eligible for admission to a particular program: a. Evaluate psychological, social and physiological signs and symptoms of alcohol and other drug use & abuse. b. Determine the consumer's appropriateness for admission or referral. c. Determine the consumer's eligibility for admission or referral. d. Identify any coexisting conditions (medical, psychiatric, physical, etc.) that indicate need for additional professional assessment and/or services. e. Adhere to applicable laws, regulations and agency policy governing alcohol and other drug abuse services. (NCSAPCB Core Function)		Clinical supervision. Peer review. Results of quantitative and qualitative review of documentation. Observation during treatment team meetings.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
<p><i>Before starting work:</i> Verification of education and credentials per transcript(s), license, and / or certification that relate to the appropriate area of knowledge/ discipline. Determine screening and assessment instrument knowledge and familiarity through employment interview process.</p>	<p>II. Provide assessment through procedures by which a counselor/ program identifies and evaluates an individuals strengths, weaknesses, problems and needs for the development of a treatment plan:</p> <p>a. Gather relevant history from consumer including but not limited to alcohol and other drug abuse using appropriate interview techniques.</p> <p>b. Identify methods and procedures for obtaining corroborative information from significant secondary resources regarding consumer's alcohol and other drug abuse and psychosocial history.</p> <p>c. Identify appropriate assessment tools.</p> <p>d. Explain to the consumer the rationale for the use of assessment techniques in order to facilitate understanding.</p> <p>e. Develop a diagnostic evaluation of the consumer's substance abuse and any co-existing conditions based on the results of</p>		<p>Review of reports generated by assessing, and evaluation.</p> <p>Ongoing clinical supervision.</p>	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	III. Conduct intake process including the administrative and initial procedures for admission to a program: a. Complete required documents for admission to the program. b. Complete required documents for program eligibility and appropriateness. c. Obtain appropriately signed consents when soliciting from or providing information from outside sources to protect client confidentiality and rights. <i>(NCSAPCB Core Function)</i>		Ongoing clinical supervision. Review of clinical documentation (assessments, reports)	
	IV. Establishes accurate diagnosis and/or assessment: a. Case history methodology <i>(NCSAPCB Competency)</i>		Ongoing clinical supervision. Review of clinical documentation (assessments, reports).	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	V. Interprets evaluative instruments correctly in order to accurately determine the consumer's needs. a. Client assessment and referral including intake, evaluation, interpretation, resources and follow-up procedures. (NCSAPCB Competency)		Ongoing clinical supervision. Review of clinical documentation (assessments, reports).	
	VI. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant law or rule.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
IV. Decision Making Is the ability to gather and synthesize individual's information from various sources and to formulate an appropriate clinical course of action. Ability to recognize individual's needs and to refer that person to appropriate professionals and resources in a timely manner and according to established criteria.	I. Gather and synthesize information and formulate a course of action. Develop and implement treatment plan by which the counselor and the consumer: a. Explain assessment results to consumer in an understandable manner: b. Identify and rank problems based on individual consumer needs in the written treatment plan. c. Formulate agreed upon immediate and long-term goals using behavioral terms in the written treatment plan. d. Identify the treatment methods & resources appropriate for the individual consumer. <i>(NCSAPCB Core Function)</i>		Peer review. Direct clinical observation and supervision. Evaluate decision-making abilities through actual case reviews.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
<i>Before starting work:</i> Evaluate decision-making abilities through hypothetical case scenarios. Employment Interview with interviewer.	II. Other competencies as required by state statute and/or rules compiled in APSM 30-1.		As appropriate and determined by the relevant statute or rule.	
V. Interpersonal Skill Is the ability to establish and maintain rapport with individuals receiving services, families and relevant others. Ability to engage individuals, family members and relevant others. Ability to establish trust, openness and motivate individual for treatment.	I. Ability to establish and maintain rapport with individual receiving services, families and relevant others: a. The recovery process as it relates to the individual, family, and to others. <i>.(NCSAPCB Competency)</i>		Feedback from individual receiving services, family members, co-workers, clinical supervisor, others providers, and staff. Clinical Supervision.	
<i>Before starting work:</i> Employment interview. Evaluate interpersonal skills through case scenarios administered by interviewer.	II. Ability to engage individuals, family members, and relevant others. a. Counselor-consumer rapport including warmth, respect, genuineness, concreteness and empathy. b. Personality growth and development. <i>(NCSAPCB Competencies)</i>		Feedback from individuals, family members, co-workers, clinical supervisor, others providers, and staff. Look at peer review results, direct observation by supervisor. Performance appraisal.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	III. Ability to establish trust and openness and motivate the individual for treatment.		Feedback from individuals, family members, co-workers, clinical supervisor, others providers, and staff. Look at peer review results, direct observation by supervisor. Performance appraisal.	
	IV. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant statute or rule.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VI. Communication Skills Ability to effectively formulate and articulate ideas in both verbal and written forms. The ability to effectively interpret and convey verbal and non-verbal information through non-traditional means effective for the individual and the population served. Informs individuals receiving services about the nature of the treatment and what is expected to achieve their goals. Effectively communicates with other treatment providers and colleagues in order to coordinate care.	I. Ability to effectively formulate and articulate ideas: a. Communication skills such as active listening, leading summarizing, reflection, interpretation, confrontation, and self-disclosure. (NCSAPCB Competency)		Feedback from individuals, co-workers, clinical supervisors and providers.	
<i>Before starting work:</i> Employment interview Evaluate communication skills through hypothetical case scenarios administered by interviewer.	II. The ability to effectively interpret non-verbal cues		Feedback from individuals, co-workers, clinical supervisors and providers.	
	III. Informs individuals about the nature of the treatment and what is expected to achieve their goals.		Results of quantitative and qualitative review. Feedback from, individuals, co-workers, clinical supervisors and providers.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	IV. Effectively communicate with other treatment providers and colleagues in order to coordinate care.		Feedback from, individuals, co-workers, clinical supervisors and providers.	
	V. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant statute or rule.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VII. Clinical Skills Ability to successfully, evaluate, match, and provide individuals with the treatment and therapies appropriate to their identified needs and conditions. Ability to write effective clinical documentation.	I. Provide crisis intervention services which respond to an alcohol and/or other drug abusers needs during acute emotional and/or physical distress: a. Recognize the elements of the consumer crisis. b. Implement an immediate course of action appropriate to the crisis. c. Enhance overall treatment by utilizing crisis events. (NCSAPCB Core Function)		Clinical supervision. Peer review. Results of quantitative and qualitative review of documentation. Observation during treatment team meetings.	
<i>Before starting work:</i> Three letters of reference from Qualified Professionals verifying the person's clinical competency. Verification of Education and Credentials per transcript(s), license, and certification.	II. Client education through the presentation of relevant alcohol and other drug use/abuse information to the consumer through formal and/or informal processes. (NCSAPCB Core Function)		Clinical supervision. Peer review. Results of quantitative and qualitative review of documentation. Observation during treatment team meetings.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	III. Orientation describing to the consumer a. Provide an overview to the consumer by describing program goals and objectives for consumer care. b. Provide an overview to the consumer by describing program rules and consumer obligations and rights. c. Provide an overview to the consumer of program operations. <i>(NCSAPCB Core Function)</i>		Results of quantitative and qualitative review of documentation.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	<p>IV. Evaluate, match and provide MH/DD/SAS treatment effectively:</p> <p>a. Individual, family and group modalities including specific techniques.</p> <p>b. Select the counseling theory(ies) that apply(ies).</p> <p>c. Apply technique(s) to assist the consumer, group and/or family in exploring problems and ramifications.</p> <p>d. Apply technique(s) to assist the consumer, group and/or family in examining the consumer's behavior, attitudes and/or feelings, if appropriate, in the treatment setting.</p> <p>e. Individualize counseling in accordance with cultural, gender and lifestyle differences.</p> <p>f. Interact with the consumer in an appropriate therapeutic manner.</p> <p>g. Elicit solutions and decisions from the consumer.</p> <p>h. Implement the treatment plan.(NCSAPCB Core</p>		<p>Three letters of reference from qualified professionals verifying the person's clinical competency.</p> <p>Progress of individual during the course of treatment in relation to treatment goals.</p> <p>Feedback from individuals, co-workers, clinical supervision, peer review and providers.</p>	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	<p>V. Case Management activities that bring services, agencies, resources or people together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contacts:</p> <p>a. Coordinate services for consumer care.</p> <p>b. Explain the rationale of case management activities to the consumer. <i>(NCSAPCB Core Function)</i></p>		<p>Clinical supervision</p> <p>Peer review</p> <p>Results of quantitative and qualitative review of documentation</p> <p>Observation during treatment team meetings</p>	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	VI. Ability to write effective clinical: a. Case management and record keeping including intake, disposition, termination, follow-up, record maintenance and compliance with federal, state, local and agency confidentiality regulations. <i>.(NCSAPCB Competency)</i> b. Prepare reports and relevant records integrating available information to facilitate the continuum of care. c. Chart pertinent ongoing information pertaining to the consumer. d. Utilize relevant information from written documents for consumer care. <i>.(NCSAPCB Core Function)</i>		Clinical supervision Peer review Results of quantitative and qualitative review of documentation Observation during treatment team meetings	
	VII. Attainment of skill, abilities and knowledge in specific therapeutic orientations and best practice standards. <i>.(NCSAPCB Competency)</i>		Verification of education and credentials. Peer review and clinical supervision results. Training/continuing education and/ or obtain advanced degree.	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	<p>VIII. Referral as a consequence of identifying the needs of a consumer that cannot be met by the counselor or agency and assisting the consumer to utilize the support systems and community resources available:</p> <p>a. Identify need(s) and/or problem(s) that the agency and/or counselor cannot meet.</p> <p>b. Explain the rationale for the referral to the consumer.</p> <p>c. Match consumer needs and/or problems to appropriate resources.</p> <p>d. Adhere to applicable laws, regulations and agency policies governing procedures related to the protection of the consumer's confidentiality.</p> <p>e. Assist the consumer in utilizing the support systems and community resources available. (NCSAPCB Core Function)</p>		<p>Clinical supervision.</p> <p>Peer review.</p> <p>Results of quantitative and qualitative review of documentation.</p> <p>Observation during treatment team meetings.</p>	

Table 5. For qualified professionals (QP) and associate professionals (AP) providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	IX. Engage in consultation with other professionals in regard to consumer/treatment / services to ensure comprehensive, quality care for the consumer: a. Recognize issues that are beyond the counselor's base of knowledge and/or skill. b. Consult with appropriate resources to ensure the provision of effective treatment services. c. Adhere to applicable laws, regulations and agency policies governing the disclosure of consumer-identifying data. d. Explain the rationale for the consultation to the consumer, if appropriate. <i>(NCSAPCB Core Function)</i>		Clinical supervision. Peer review. Results of quantitative and qualitative review of documentation. Observation during treatment team meetings.	
	X. Other competencies as required by state statute and/or rule.		As appropriate and determined by the relevant statute or rule.	
VIII. Supervision & Management Skills				

Table 6. For paraprofessionals providing mental health services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
I. Technical Knowledge In the use of appropriate interaction with consumer and community agencies/resources and agency requirements and procedures.	Demonstrates knowledge of interagency and community supports. Seeks professional growth & development, especially for special populations served and their multiple service and support needs. Demonstrates knowledge of System of Care principles and local and regional application. Has a basic knowledge of human development including emotional and behavioral disorders and a general knowledge of the service systems for age appropriate service delivery as well as groups with single and multiple disabilities. Recognizes signs and symptoms of MH needs and co-occurring disorders. Other competencies as required by state statute and/or rule, such as confidentiality rules, seclusion and restraints, and client rights.		Ongoing supervision. Review of documentation. Observation during treatment team meetings. Professional growth and development plan is established with supervisor and jointly assesses progress yearly. Participation in Collaborative meetings. Ongoing supervision. Review of documentation. Documented annual continuing education. Demonstrates to supervisor positive application of newly acquired knowledge. As appropriate and determined by the relevant law or rule.	

Table 6. For paraprofessionals providing mental health services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
II. Cultural Awareness In the delivery of services to diverse populations. Understands and can articulate how cultural differences can affect treatment. Ability to communicate and to provide competent and appropriate services to diverse populations.	Interacts with person receiving services, family and extended support system in a culturally sensitive manner. Interacts with colleagues and others in a culturally sensitive manner. Understands the impact of personal belief system on delivery of services, and appropriately adjusts personal performance. Maintain knowledge of issues that affect the populations served. Other competencies as required by state statute and/or rule.		A. Ongoing supervision. Review of documentation. Observation during treatment team meetings. B. Ongoing supervision. Annual Performance evaluation. C. Ongoing supervision. Review & understanding of documentation. Observation during treatment team meetings. Documented annual continuing education. D. Demonstrates to supervisor positive application of culturally sensitive techniques. Articulates how those issues impact services. E. As appropriate and determined by the relevant statute or rule.	
III. Analytical Skill In recognizing, monitoring, and reporting regarding the needs and responses of the person receiving mental health and other services. Knows how to problem solve and get help regarding system issues that affect the person being served. Uses information about psychological, physical, emotional, spiritual, cultural	Utilizes analytical skills to identify effective ways to work with specific individuals, families, & groups. Demonstrates knowledge and		A. Review of notes regarding observations made by worker and discussion in supervision regarding worker's informal assessment of individual(s) Ongoing supervision. B. Review of notes regarding observations made by worker and discussion in supervision regarding worker's informal assessment of individual(s)	

Table 6. For paraprofessionals providing mental health services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
and developmental issues to provide services in ways that are based on the individual's strengths, preferences and needs.	<p>application of System of Care Values & Principles when working with children and families.</p> <p>Has a basic understanding about how diagnoses may be related to behaviors.</p> <p>Other competencies as required by state statute and/or rule.</p>		<p>Ongoing supervision.</p> <p>C. Ongoing supervision.</p> <p>Review of documentation.</p> <p>D. As appropriate and determined by the relevant statute or rule.</p>	

Table 6. For paraprofessionals providing mental health services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
IV. Decision-Making Is the accurate appraisal of problems and conditions of person being served in a variety of settings and systems. Ability to synthesize individual's information from involved agencies or sources, and to formulate and implement an appropriate course of action in collaboration with these agencies or sources. Ability to recognize person's needs and to refer individual to appropriate professionals and resources. Makes appropriate decisions and/or referral in a timely manner.	Demonstrate ability to make decisions in collaboration with individuals, families, and involved agencies or sources and shows good judgment related to work performance and ethics. Synthesize individual and system information and implement course of action as agreed upon by individuals, families, and involved agencies or sources. Can provide age-appropriate structure and respectful response for youth, families and other agencies under stress and resolve conflict in a nonviolent manner. Other competencies as required by state statute and/or rule.		A. Direct observation and supervision of collaborative efforts. Feedback from individuals, families, and involved agencies or sources. B. Feedback from individuals, families, and involved agencies or sources. Completes training in nonviolent crisis response and resolution. C. Feedback from individuals, families, and involved agencies or sources. Completes training in nonviolent crisis response and resolution. D. As appropriate and determined by the relevant statute or rule.	
V. Interpersonal Skill Is the ability to establish rapport, openness, and trust. Ability to interact effectively with individuals, families, and involved agencies to promote active treatment and relapse	A. Demonstrates the abilities of engagement, developing rapport with individuals, families and involved agencies. B. Promotes active treatment and relapse		A. Feedback from persons receiving services, family members, co-workers, clinical supervisor, other providers, and involved agencies. Direct observation by supervisor. Outcomes.	

Table 6. For paraprofessionals providing mental health services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
prevention.	<p>prevention.</p> <p>C. Interacts effectively with individuals and groups and can maintain relationships with individuals and groups.</p> <p>D. Demonstrates empathy and helps others do the same in stressful situations.</p> <p>E. Other competencies as required by state statute and/or rule.</p>		<p>B. Feedback from persons receiving services, family members, co-workers, clinical supervisor, other providers, and involved agencies.</p> <p>Direct observation by supervisor.</p> <p>Outcomes.</p> <p>C. Feedback from persons receiving services, family members, co-workers, clinical supervisor, other providers, and involved agencies.</p> <p>Supervision</p> <p>D. Feedback from persons receiving services, family members, co-workers, clinical supervisor, other providers, and involved agencies.</p> <p>Supervision</p> <p>E. As appropriate and determined by the relevant law or rule.</p>	

Table 6. For paraprofessionals providing mental health services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VI. Communication Skills Ability to effectively formulate and clearly articulate ideas in both verbal and written forms. The ability to effectively interpret and convey verbal and non-verbal information through appropriate means for the individual and the population served.	Active listening and communicating support with individuals and families. Receiving and reporting information effectively. Uses communication that is age-appropriate and culturally relevant. Write appropriate service notes to the person's identified needs. Other competencies as required by state statute and/or rule.		A. Feedback from individuals, co-workers, supervisors and providers. B. Progress of individual during the course of treatment. Results of records review. Supervision. Oral and written communication. C. Results of quantitative and qualitative review. D. As appropriate and determined by the relevant statute or rule.	
VII. Clinical Skills				
VIII. Supervision & Management Skills				

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
I. Technical Knowledge Understands and can discuss concepts and information that relate to the services and supports being used; and understands the indicators of developmental delay, disability, or co-occurring disorders.	Understand the basic philosophy of person and family centered planning and why it is preferred over more traditional methods.	<p>The support person is able to describe person and family centered planning.</p> <p>The support person is able to discuss why person and family centered planning is preferred over more traditional methods.</p> <p>Through interaction with the individual and/or family, the support person contributes information that is helpful in the planning process regarding the individual's preferences, relationships, supports and routines.</p> <p>The support person asks the individual (or family) questions about himself, his past, about his preferences, his dreams, about how he wants friends and family involved in his life.</p> <p>The support person, with permission from the individual, talks to the individual's friends</p>	<p>Through observation of individual and/or family feedback.</p> <p>Discussions with the individual and/or family.</p> <p>Work with individual and/or family.</p> <p>Support person participation in planning meetings.</p> <p>Plan implementation.</p> <p>Through supervisory review of documentation.</p> <p>Through support person evaluations.</p> <p>Through attendance/participation in workshops.</p>	<p>Overview of current best practices in person/family-centered planning by a North Carolina recognized instructor of one of the best practice models.</p>

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		<p>and family members, asking questions about the things the individual enjoys doing, what things to avoid, favored routines and rituals, what to avoid to help the individual experience good days, about the individual's dreams.</p> <p>With the individual's permission, the support person shares information about reactions of the individual to his environment (home, work, community) in order to assure that things the individual likes/enjoys are included as a part of the individual's routines; in order to avoid imposing routines that are negative upon the individual.</p> <p>The support person is able to demonstrate the concept of independence, responsibility and inclusion in working with the individual</p>		

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		<p>and/or family.</p> <p>Does not decide what the individual wants to do, but finds out from the individual what he/she wants to do.</p> <p>Recognizes that change is continually occurring in the individual's life and assists/supports the individual toward positive change in his/her life based on observations/new information.</p>		
	B. Knowledge of developmental disabilities	<p>The support person is able to provide supports needed for people who have a developmental disability who may also:</p> <p>Exhibit signs and symptoms of substance abuse.</p> <p>Exhibit signs and symptoms of mental illness.</p> <p>Exhibit signs and symptoms of substance abuse and mental illness</p> <p>Exhibit signs and symptoms of a</p>	<p>B. Through observation of individual and/or family feedback.</p> <p>Discussions with the individual and/or family.</p> <p>Work with individual and/or family.</p> <p>Support person participation in planning meetings.</p> <p>Plan implementation.</p> <p>Through supervisory review of documentation.</p> <p>Through support person evaluations.</p> <p>Through attendance/participation in workshops.</p>	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		<p>personality disorder.</p> <p>Have a head injury.</p> <p>The support person is able to recognize medication issues and apply to the participant supported. This includes:</p> <p>Their use and misuse.</p> <p>General categories of side effects and adverse side effects on physical and mental status.</p> <p>The ability to identify some abnormal involuntary movements.</p> <p>Withdrawal signs and symptoms from substances like cigarettes, alcohol, etc., and</p> <p>The value and necessity of interventions other than just drugs.</p> <p>The support person is able to demonstrate the ability to support the person in a manner appropriate to that individual's stage of life.</p>		
	C. Remains aware of best practice standards	The support person is able to discuss and use	Through observation of individual and/or family feedback.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	for the individual's and families served.	best practice standards. The support person completes required training education/certification, continues professional development and keeps abreast of relevant resources and information.	Discussions with the individual and/or family. Work with individual and/or family. Support person participation in planning meetings. Plan implementation. Through supervisory review of documentation. Through support person evaluations. Through attendance/participation in workshops. The support person identifies areas for self-improvement, pursues necessary educational/training resources, and shares knowledge with others.	
	D. Other competencies as required by state statute and/or rule, such as confidentiality rules, seclusion and restraints, and client rights.	Developed as needed.	Develop as needed.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
II. Cultural Awareness Understands the various cultures, genders, socio-economic influences, and religious beliefs of the individuals served and advocates for those individual beliefs throughout the planning and plan implementation process.	A. The skills to support the individual in the development of friendships and other relationships.	In the use of interpersonal skills, the support person recognizes and respects individual's choices and preferences regarding the nature of relationships he or she is seeking and assists the individual in developing such relationships The support person does not try to control the relationship or relationships the individual develops with others.	Through individual and/or family feedback. Review of documentation. Increased involvement in community activities, groups and organizations.	
	B. The ability to assist in the implementation of an individualized plan which supports cultural and religious beliefs of the individual and or family.	The support person respects cultural differences of the individual, family members and peers as demonstrated by: Sensitivity to dietary preferences and meal preparation. Social preferences. Self-care needs. Routines and rituals. Religious practices and preferences. Socioeconomic status.	Through observation of interactions/dialogue/activities between the support person and the individual. Between the support person and the family. Between the support person and peers.	**Women's health issues.

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		Sexuality issues.		
	C. Knowledge of and respect for the individual's rights and responsibilities.	<p>The support person does not talk about sensitive issues relating to the individual around others</p> <p>The support person observes when the individual is having a stressful time and does not push the issue of completion of tasks, but shares the task when the individual is able to cope with addressing the task</p> <p>The support person does not change a individual's routine for his/her own convenience</p> <p>The support person knows and respects the individual's Rights, using daily living situations to discuss rights & responsibilities as a citizen and purchaser of support services</p> <p>The support person does not speak in a deficit-based way (what the individual does</p>	<p>Through observation of:</p> <p>Interactions/dialogue/activities between the support person and the individual.</p> <p>Documentation.</p> <p>The individual's exercise of rights.</p> <p>The individual's understanding of responsible citizenship.</p>	

Table 7. For paraprofessionals providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		wrong, cannot do)		
	D. Other competencies as required by state statute and/or rule.	Develop as needed.	Develop as needed.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
III. Analytical Skills The ability to gather information on the individual's capabilities, gifts, behaviors, preferences, skills and needs for use in the development of the individual's individual plan. Evaluate situations in order to respond appropriately.	A. The ability to gather information about the individual and to contribute to the assessment and planning process	The support person gathers information about the individual through Developing a relationship with the individual Interactions with the individual, family and friends, observing and noting changes in capabilities, gifts, behaviors, preferences, skills, needs for other/additional supports. Assisting the individual with learning. The support person contributes to the assessment and planning process by: participating in planning meetings, providing information to support team members in a manner that is respectful of the person and family centered process.	Observation by the supervisor of the assessment and planning process Self report Observation & feedback by support team members Individual and/or family report	
	B. The ability to accurately evaluate situations and to make	The support person accurately evaluates situations by	Supervisor analysis of support person's knowledge of established criteria	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	an appropriate judgement regarding the action to be taken	<p>understanding the environment in which he/she works, understanding/identifying values that are important to the individual, understanding/identifying the risks that are present.</p> <p>The support person makes appropriate decisions regarding the action to be taken by being prepared for and understanding the possible consequences of the decision he/she must make, understanding his/her responsibility to make decisions, using the information identified in when making decisions, seeking support, when needed, to resolve issues.</p> <p>The support person assists with the process of recognizing program and organizational issues, seeks solutions/responses that support the person and provides input to</p>	<p>Observation of support person's preparation and response to situations</p> <p>Observation of support person's advocacy efforts for the individual and/or family</p> <p>Review of documentation</p> <p>Self report</p> <p>Observation and feedback by support team</p> <p>Supervisory analysis of ability to recognize issues and provide input</p> <p>Individual and/or family report</p>	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		prevent further/ additional problems or issues.		
	C. The ability to provide input into program design, organization and program review.	Within the organizational team the support person provides input, recognizes program and organizational issues and seeks solutions/responses that support the person.	Observation by the supervisor. Self report. Observation & feedback by support team members. Individual and/or family report.	
	D. The ability to recognize and act upon his or her own personal limitations.	The support person recognizes when a productive relationship with the individual is jeopardized and addresses the problem by seeking supervisory support and/or requesting a transfer of services when necessary. The support person is able to identify areas for self-improvement and to suggest educational/training resources.	Observation by the supervisor. Self report. Observation & feedback by support team members. Individual and/or family report.	
	E. The ability to informally assess and apply findings of the local community for	The support person uses informal community <i>mapping</i> skills to assist, in	Through feedback from individual and/or family. Through discussions with the support person regarding application of	**Using and Building Leisure opportunities.

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	opportunities for inclusion activities based upon the interests of the person.	supporting the person's interests, to increase community presence and access. The support person builds upon leisure interests of the individual, using natural community supports and opportunities.	community mapping skills. Through review of documentation of notes supporting increased community access.	
	F. Other competencies as required by state statute and/or rule.	Develop as needed.	Develop as needed.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
IV. Decision Making The ability to balance support for the individual's stated choices against the core responsibilities. Limitations of the position And potential risks to the person. To use information from different sources, specific to the individual, in order to present a complete 'picture' of the situation/event. To assist the individual to use findings of assessments to develop strategies for obtaining needed resources and supports. To use information to make appropriate and timely decisions and/or referrals.	A. The ability to identify a crisis, defuse the situation, intervene appropriately, and contact necessary supports.	The support staff practices crisis prevention, evaluates interactions of the individual with others and with the environment, and responds accordingly. Intervenes to reduce conflict. Intervenes to prevent medical crisis. Identifies environmental contributors to crisis and works to reduce the impact. Identifies social contributors to crisis and works to reduce the impact. The support staff can explain the appropriate techniques that would be effective in managing the crisis and ensuring a safe environment. The support staff is able to identify a situation beyond his or her ability or training and take steps to gain needed assistance in	Supervisory. Review of documentation (record as well as incident reporting). Observation. Receipt of peer, team and/or individual reports.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		the crisis situation. The support staff is able to implement a crisis plan and/or established procedures when responding to a crisis.		
	B. The ability to monitor crisis situations, discussing the incident with authorized staff and individual(s), and making immediate adjustments for supports and the environment, and complying with regulations for reporting.		Supervisory Review of documentation (record as well as incident reporting). Observation. Receipt of peer, team and/or individual reports. Review of data to determine whether crises are being reduced or not.	
	C. The ability to support the individual to lead a self-determined life, providing information necessary for the individual to use in building self-esteem and in making decisions	The support staff assists and supports the individual To make informed choices To follow through on responsibilities To take appropriate risks in an informed manner Encouraging the individual to make decisions about living, work and social relationships Assisting the individual	Supervisory Review of documentation Observation Receipt of peer, team and/or individual reports	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		to understand options and the possible consequences of these options as they relate to the physical health and emotional well-being of the individual Representing the best interests of the individual who cannot speak for him/herself by finding alternative ways of understanding his/her needs, including gathering information from others who represent his/her best interests.		
	D. The ability to use information and feedback gathered to make appropriate and timely decisions and/or referrals.	The support person assists with identifying, getting and using needed equipment (e.g., adaptive equipment); In recommending to the supervisor the possible need for a medical, dental, physical, occupational, and/or communication therapy referral.	Supervisory observation of individual and review of documentation	
	E. Other competencies as required by state statute and/or rule.	Determined as needed.	Determined as needed.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
V. Interpersonal Skills Ability to establish and maintain relationships with individuals, their families, co-workers, and others.	A. The ability to develop and maintain an effective relationship with the individuals served, their families and friends.	The support person engages the individual and relevant others by: Spending time with the individual (and/or family and friends), getting to know him/her. Interacting with the individual doing things the individual likes to do. Getting to know the individual's dislikes. Assisting the individual to avoid things he/she dislikes when reasonable. Interacting often to become familiar with the individual's communication style. The support person assists the individual and/or family in understanding how to advocate by: Assisting the individual to achieve identified personal outcomes Encouraging the individual to practice advocating for self.	Supervisor. Observation of relationships with the individual, family, friends, community members, e.g. individual is recognized by name where he lives, shops, works, plays. Review of documentation. Feedback from the individual and/or family. Self-report. Review of any report of breach of confidentiality.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		<p>Increasing the individual's awareness of self-advocacy methods and techniques.</p> <p>Increasing the individual's awareness of areas of responsibility and of citizen responsibilities.</p> <p>Providing information on peer support and self-advocacy groups.</p> <p>Providing information about human, legal, civil rights and other resources.</p> <p>Assisting the individual to get information from these resources.</p> <p>Assisting the individual to use information for self-advocacy and decision making in all aspects of the individual's life.</p> <p>The support person maintains knowledge of relevant community and resource information that is responsive to the individual's needs and preferences and is</p>		

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		actively helping the person to make connections with acquaintances, friends and community members.		
	B. The ability to maintain effective collaborative professional relationships with support team members and co-workers.	The support person works cooperatively with and responds in a professional manner with all support team members and co-workers.	Supervisor. Observation of relationships with support team members and co-workers. Review of documentation. Feedback from team members, the individual, and/or family. Self-report. Review of any report of breach of confidentiality.	
	C. The ability to interact effectively with individuals and groups within the community.	The support person displays a positive image when linking with other agencies. The support person is knowledgeable in relaying information, e.g. to physician, dentist, job coach, employer. The support person maintains confidentiality of the individual information in formal as well as informal settings. The support person works with the	Supervisor. Observation of relationships with community members. Review of documentation. Feedback from community members and agency representatives. Self-report. Review of any report of breach of confidentiality.	

Table 7. For paraprofessionals providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		individual's informal support system, assisting with, or initiating identified community connections.		
	D. Other competencies as required by state statute and/or rule.	Determined as needed.	Determined as needed.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VI. Communication Skills Ability to effectively formulate and articulate ideas in both verbal and written forms. Ability to use effective, sensitive communication skills to build rapport and channels of communication by recognizing and adapting to the range of the person's communication styles.	A. The ability to use People First language in written and oral communication (ex: persons with epilepsy).	Through written and oral communications, the support person consistently uses language that is respectful of the person and/or family receiving supports, emphasizing capabilities and is non-discriminatory (ex: When John is angry he finds that going for a walk helps to calm him versus John exhibits explosive outbursts followed by elopement. Susan is having a hard time concentrating today versus Susan is off-task.) That demonstrates that the relationship between the support person and the individual is one of partnership versus control (ex. Not using words such as let, allow which demonstrate dictation of actions – 'I'll let you go to the store/make a phone call) that communicates respect for the individual's need for	Review of documentation and observation of interactions with the individual, family, team members and other individuals involved in the person's life.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		privacy, e.g. not talking about sensitive issues relating to the person around others.		
	B. The ability to apply basic philosophies of person and family centered planning.	<p>The support person takes time to listen to the individual.</p> <p>The support person responds, in action, to requests the individual may make.</p> <p>For those who do not communicate with words, the support person learns what the individual likes/does not like, wants to do/doesn't want to do and shares that information with the individual's team of supports.</p> <p>When working with families, the support person takes time to listen to family member's input; to listen to how the family member wants his/her child supported; to ask questions of the family members.</p> <p>When working with individuals, the support</p>	<p>Through use of:</p> <p>Observation of interactions between support person and individual, family, friends, others involved in individual's life.</p> <p>Individual and/or family feedback.</p> <p>Satisfaction survey.</p> <p>Observation of participation in support team meetings.</p> <p>Observation of individual's behavior.</p> <p>Review of documentation/written input.</p>	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		<p>person seeks ways to understand and communicate, looking beyond the behavior to see what the individual is saying; looking beyond the gesture to understand, interpret and apply the gestural meaning.</p> <p>When the individual is unable to relay information, the support person assists in describing health issues and concerns to planning team members/with this individual's circle of support.</p> <p>The support person understands that people change and so does the person's plan – that it is a changing reflection of the person's life – and provides frequent feedback regarding changes needing to be made to the plan document.</p>		
	C. The ability to identify and document	The support person is able to use information	Observation of interactions between the support person and individual.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	communication skills and needs of the individual.	<p>collected from interactions with the person and discussions with others that know the person well to help to determine the person's main modes of communication.</p> <p>C.1. The support person uses communication skills to introduce the person being served to members of his community emphasizing the person's gifts.</p> <p>Seeking opportunities to make connections of shared interest.</p> <p>Promoting participation and involvement of the person with civic, church, neighbor interests, etc.</p> <p>The support person documents the communication skills and needs of the individual.</p> <p>The support person demonstrates use of the communication device(s)/styles that</p>	<p>Review of documentation.</p> <p>Observation of use of communication devices.</p> <p>Observation of individual's increased ability to communicate.</p>	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		meet the individual's needs as a result of the intervention.		
	D. The ability to secure current information about generic community resources (e.g., transportation, recreation, social organizations, etc.) in order to make this information available to assist the individual to make linkages.	The support person keeps up-to-date information of relevant community and resource information that is responsive to the individuals' needs and preferences.	Review of documentation to determine: Increased individual linkages. Exposure to more varied community experiences. Observation. Individual and/or family feedback.	
	E. The ability to maintain accurate records, collecting, compiling and evaluating data, and submitting records to appropriate sources in a timely fashion.	The support person records data coherently, accurately and objectively. The support person exercises proper judgment in balancing reporting requirements (agency policy, government and funding requirements) with privacy needs. The support person consistently uses people first language in all written communication (e.g. "person with epilepsy" vs. "epileptic").	Supervisory. Review of documentation. Assignment of a mentor/mentor report.	
	F. The ability to learn	The support person	Supervisory observation.	

Table 7. For paraprofessionals providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	and remain current with appropriate documentation systems, setting priorities and developing a system to manage documentation.	uses computers, when available, and other tools to organize and retrieve information.		
	G. Other competencies as required by state statute and/or rule.	Developed as needed.	Developed as needed.	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VII. Clinical Skills The ability to successfully assess, evaluate and provide individuals with services, supports and resources appropriate to the identified strengths, preferences, needs and conditions.	The ability to focus on teaching replacement behaviors and skills as an alternative to the problem behavior, instead of trying to "get rid of challenging behaviors."	The support person is able to discuss the importance of an individual's environment and his/her behavioral, social, recreational, and communication development. The support person is able to discuss the impact of: What the individual is doing. Where the individual spends time. And with whom the individual spends time has a lot to do with his/her behavior. The support person is able to "listen" to what the behavior is saying to assist in identifying why the behavior is happening. The support person is able to assist in	Supervisor. ⁶ Observation of interactions between support person and individual. Receipt and review of individual feedback. Review of documentation.	

⁶ *Clinical or professional supervision is regularly scheduled by a qualified professional or associate professional with a staff member who is providing direct intervention to a person or persons. The purpose of supervision is to ensure that each person receives appropriate treatment or habilitation which is consistent with accepted standards of practice and the preferences and needs of the person. Clinical supervision is required for the provision of services for individuals with co-occurring diagnosis.

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		<p>identifying which social/communicative behaviors work best for the individual in order for his/her needs to be met.</p> <p>The support person is able to identify triggers in the environment that set the behavior off.</p> <p>The support person is able to determine how the individual learns best (by what he/she hears, sees or by doing activities.</p> <p>The support person is able to discuss influences on behavior which may include:</p> <p>Personal expectations.</p> <p>Expectations of others.</p> <p>Nature/value of materials available to the individual.</p> <p>Nature of the activity.</p> <p>Nature of instructions given to the individual.</p> <p>Number of people present in the environment.</p> <p>Behavior of other</p>		

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		<p>people present.</p> <p>Environmental noise, crowding, temperatures, lighting.</p> <p>Time of day when behaviors occur.</p> <p>Effects of hunger, medication, seizures, pain, medical issues, lack of sleep, etc., upon the individual.</p> <p>Length of time needed to complete an activity.</p> <p>Sudden changes in routines.</p> <p>The predictability of a day.</p> <p>The support person is able to use graphs to record data.</p>		
	B. The ability to use different teaching methods when teaching someone a new skill.	<p>The support person is able to demonstrate the use of task analysis when teaching a new skill.</p> <p>The support person is able to demonstrate the types of prompts and their uses in teaching.</p> <p>The support person asks the individual before using physical touch (physical</p>	<p>Supervisor.</p> <p>Observation of interactions between individual and individual.</p> <p>Receipt and review of individual feedback.</p> <p>Review of documentation.</p> <p>Determination of personal outcomes that have been met.</p>	

Table 7. For paraprofessionals providing developmental disabilities services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
		<p>assistance).</p> <p>The support person is able to identify when a individual does not want touch (physical assistance) and demonstrates respect by not invading the individual's personal space.</p> <p>The support person demonstrates the use of natural teaching techniques (teaching to cook when it is time to eat or when a situation arises in which the individual can practice the skill he/she is learning).</p> <p>The support person demonstrates flexibility in using the different teaching techniques, changing techniques when the technique is not effective.</p>		
	C. The ability to demonstrate competency to perform the support service(s) described within the individual plan.	The support person demonstrates skills necessary to provide supports described within the individual's plan.	<p>Feedback from the individual and/or family.</p> <p>Observation by the supervisor.</p> <p>Outcomes assessment.</p>	
	D. Other competencies			

Table 7. For paraprofessionals providing developmental disabilities services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	as determined by state statute and/or rule.			
VIII. Supervision & management skills				

Table 8. For paraprofessionals providing substance abuse services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
I. Technical Knowledge In the use of treatment and rehabilitation techniques that apply to the services authorized. Understands and can articulate technical concepts and information that relate to the nature of the services and supports used to provide treatment. Recognizes signs and symptoms of substance abuse need and co-occurring disorders.	1. Demonstrates knowledge of supportive counseling techniques including: a. Application of supportive counseling techniques to the individual consumer. b. Group communications, problem solving and supportive techniques. c. Recovery process. 2. Demonstrates knowledge of interagency and community supports: a. Understanding of recovery programs including 12 step programs. b. Familiar with agency services. c. Familiar with community services. 3. Recognizes signs and symptoms of substance abuse needs and co-occurring disorders. a. Understands difference between SA abuse Vs dependence. b. Understands the effects of substance use on the body/brain. 4. Other competencies as		Direct clinical observation. Clinical supervision. Review of clinical documentation. Ongoing supervision. Peer review. As required and determined by the relevant statute or rule.	

Table 8. For paraprofessionals providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
	required by state statute and/or rule, such as confidentially rules and client rights.			

Table 8. For paraprofessionals providing substance abuse services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
II. Cultural Awareness In the delivery of services to diverse populations. Understands and can articulate the psychological, sociological and political aspects of providing MH/DD/SAS services to diverse populations. Ability to communicate and to provide competent and appropriate services to diverse populations.	1. Interacts with person receiving services, family, and extended support system in a culturally sensitive manner. 2. Effectively works with the individual and others to develop practices sensitive to cultural, religious, disability, and gender issues. 3. Interacts with colleagues and other professionals in a culturally sensitive manner. 4. Understands the impact of personal belief system on delivery of services, and appropriately adjusts personal performance. 5. Maintains knowledge of ongoing changes in the cultures being served, and articulates how those changes impact services. 6. Other competencies as required by state statute and/or rule, such as confidentiality rules and client rights.		Peer review. Ongoing supervision. Observation during treatment team meetings. Documented annual continuing education. Demonstrates to supervisor positive application of culturally sensitive techniques. As required and determined by the relevant statute or rule.	
III. Analytical Skill In gathering screening and assessment information pertaining to those being served and recounting	1. Assists in the screening and assessment process by gathering relevant information to be used in		Ongoing supervision. Observation during treatment team meetings. Peer review	

Table 8. For paraprofessionals providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
information to clinicians as appropriate.	consumer the service plan. 2. Recognizes relevant information and accurately reports details. 3. Complete required documentation. 4. Other competencies as required by state statute and/or rule.		Review of documentation. As appropriate and determine by the relevant statute or rule.	

Table 8. For paraprofessionals providing substance abuse services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
IV. Decision-Making Is the ability to recognize an individual's needs and refer that person to the appropriate resources.	1. Recognize consumer needs and refer to appropriate resources. 2. General understanding and application of necessary interventions that address and minimize consumer problems and issues. 3. Identify specific strategies to address consumer's needs relative to the service plan. 4. Other competencies as required by state statute and/or rule.		Direct observation. On going supervision. As appropriate and determine by the relevant statute or rule.	
V. Interpersonal Skill Is the ability to establish trust, openness and maintain rapport with individuals receiving services and relevant others. Ability to motivate individuals for treatment.	1. Establishes trust, openness and maintains rapport with individuals receiving services and relevant others. 2. Ability to encourage and motivate individuals to engage in treatment. 3. Effectively interacts with individuals seeking services. 4. Other competencies as required by state statute and/or rule.		Direct observation. On going supervision. As appropriate and determine by the relevant statute or rule.	
VI. Communication Skills Ability to effectively formulate and articulate	1. Uses active listening skills that are sensitive to individual and cultural differences.		Direct observation. On going supervision. As appropriate and determine by the	

Table 8. For paraprofessionals providing substance abuse services				
Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
ideas in both a verbal and written manner and have the ability to recognize non-verbal cues.	2. Recognizes non-verbal cues. 3. Provides accurate and legible written documentation. 4. Other competencies as required by state statute and/or rule.		relevant statute or rule.	

Table 8. For paraprofessionals providing substance abuse services

Core Skill Area	Competency	Outcomes Expected	Measurement Tools (Performance Indicator) can include, but not limited to the following:	* Training Required **Training Recommended
VII. Clinical Skills Ability to successfully screen, assess, and identify an individual's needs strengths & weaknesses as well as preferences. Begin a preliminary Service Plan and follow an established Service Plan.	1. Ability to screen and assess for and individuals initial service needs. 2. Ability to recognize signs and symptoms of alcohol and drug use. 3. Ability to apply crisis intervention techniques. 4. Conduct all services in a culturally sensitive manner. 5. Ability to understand and recognize stages of change and other signs of progress. 6. Implement strategies relative to the established service plan in consultation with the designated clinician. 7. Other competencies as required by state statute and/or rule.		Direct observation. On going supervision. As appropriate and determine by the relevant statute or rule.	
VIII. Supervision & Management Skills				

*Clinical or professional supervision is regularly scheduled by a qualified professional or associate professional with a staff member who is providing direct intervention to a person or persons. The purpose of supervision is to ensure that each person receives appropriate treatment or habilitation which is consistent with accepted standards of practice and the preferences and needs of the person. Clinical supervision is required for the provision of services for individuals with co-occurring diagnosis.

NAME _____

STATUS _____

COMPETENCY-BASED EMPLOYMENT SYSTEM

Independent Practitioner/Provisional and/or Qualified Professionals/Associates and/or Paraprofessionals

CHECK AND DATE WHICH OPTION(S) ARE USED TO DETERMINE A CORE COMPETENCY. EXAMPLE: HOW WILL TECHNICAL KNOWLEDGE BE MEASURED? (INTERVIEW, WRITTEN TEST...) ATTACH ANY SUPPORTING DOCUMENTATION TO THIS FORM.

Competency-based Management Assessment Criteria with Date									
Core Competency		Experience Accomplishments	Educational Credentials	Occupation Certification/Licensure	Interview	Work Sample	Oral/Written Test	Self Assessment	Relevant Additional Education, Certification/Licensure
Technical Knowledge	MH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural Awareness Competency	MH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical Skills	MH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decision Making Skills	MH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interpersonal Skills	MH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication Skills	MH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinical Skills	MH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	DD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	SA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NAME _____
STATUS _____

COMPETENCY-BASED EMPLOYMENT SYSTEM

Staff Name: _____ **Date:** _____

Supervisor Name: _____ **Supervisor's Signature:** _____ **Date:** _____

Authorizing Body/Designee(optional): _____ **Date:** _____

Authorizing Signature (optional): _____ **Date:** _____

Date of Renewal: _____

Clinical Supervision Frequency

- ☐ *Weekly*
☐ *Monthly*
☐ *Bi-monthly*
☐ *NA*

Change In Professional Status	
<i>New Status</i>	<i>Date</i>